

APPLICATION FOR EXISTING SECOND DWELLING UNIT(S)

Town of Los Gatos- COMMUNITY DEVELOPMENT DEPARTMENT

Civic Center: 110 E. Main Street, Los Gatos, CA 95032 Date Received: _____

Phone: (408) 354-6874 Fax: (408) 354-7593

Mailing Address: P.O. Box 949, Los Gatos, CA 95031 Application # _____

1. PROPERTY LOCATION:

Address of subject property: _____

2. PROPERTY DETAIL:

Lot area: _____ Zoning: _____ APN: _____

3. PROPERTY OWNER:

Name: _____ Phone: _____

Address: _____

City: _____ State: _____

Zip: _____

I hereby certify that I am the owner of record of the property described in Box #1 and that I approve of the action requested herein.

SIGNATURE OF PROPERTY OWNER: _____

DATE: _____

4. REQUEST FOR: _____ 1 Secondary Unit _____ 2 Secondary Units

****DO NOT WRITE IN THIS SPACE**

Fee for 1 Unit

PLANSEC	\$	816.00
PTRACPLN	\$	32.64
PLANAP	\$	81.60
TOTAL	\$	930.24
*RT85STUD	\$	81.60
TOTAL	\$	1,011.84

Fee for 2 Units

PLANSEC	\$	1,132.00
PTRACPLN	\$	45.28
PLANAP	\$	113.20
TOTAL	\$	1,290.48
*RT85STUD	\$	113.20
TOTAL	\$	1,403.68

* If site is located within Route 85 Study Plan Area

FINAL STATUS _____ Non-Conforming _____ Unlawful